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| Application Number | 10/518,044 |
| Filing Date | 08-17-2009 |
| First Named Inventor | Amit Krishna Antarkar |
| Title | Process of manufacture of novel drug delive |
| Art Unit | 1618, Confirmation # 2710 |
| Examiner Name | YOUNG, MICAH PAUL |
| Attorney Docket Number | |

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

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OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/GB-96) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

Signature

Date

05 JAN 2011

Name

Dr. ANKUR JANAK SHAH

Telephone

91 22 67163400

Title and Company

EXECUTIVE DIRECTOR, INVENTIA HEALTHCARE PRIVATE LIMITED

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representatives are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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